

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X060

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishme 2637 Owner Gwy + Owner's Ac	n Coffeent Address of Charles be Lauthe Idress Bandon (number and street, city, state, zip code) Rd Num Albay, 12 4717	Telephone Number ST2 526 7576 Purpose: . Routine 2. Follow-up 3. Complaint 4. Pre-Operational 5. Temporary 6. HACCP 7. Other (list)	Date of Inspection (mm/dd/yr) 2/3/zoi9	
Responsible Certified Fe	kah 5 e Person's E- ood Manager A Mo	mail		Menu Type (See back of page) 1 2 2 3 4 5	
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"					
Section#	 	R Narrative			Be Corrected By
245	NC	Observed miping rags outside of souther solution - staff should schop a contrar bucket before each shift			Corrected
		- shiff should solve a sailore bu	uleit before each	clift	<u> </u>
291	Ne	Observed no quat among test stri	ps amilable	1	wuk
					· · · · · · · · · · · · · · · · · · ·
:					
			<i>i</i> .		
					<u>·</u>
	(n) meyand to	the printed): Shift Smills MALL Subtle	Inspected by (name and title A.) Inspected by (signature):	printed):	n (EAS)
cc:	_ <i>X1</i> [00:		cc:	